

32, he leaves behind a legacy of humanitarian works and honorable deeds that would do any man or woman proud. Before serving in Afghanistan as an Army reservist, Ben had worked for the Centers for Disease Control as an international emergency and refugee health analyst. And he was the cofounder and director of ClearWater Initiative, an organization which aspired to provide clean drinking water to refugees displaced by an international emergency. In the past 2 years, his leadership at ClearWater had managed to provide over 6,500 people in Uganda with clean drinking wells.

To the thousands of lives he changed in Uganda, Ben was known as "Moses Ben." But to his grieving family—his parents, Gary and Laura; his siblings, Anna and Samuel; his fiancée, Beth; her son, Danny; and her parents, Barbara and Jimmy Segaloff—he was simply Ben, a warm, kind, generous, and loving young man with so much life ahead of him taken from all of us too soon.

Connecticut mourns and America mourns this family's loss today.

FACTS ABOUT THE DEMOCRATS' HEALTH CARE PLANS

(Mr. SMITH of Texas asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. SMITH of Texas. Mr. Speaker, here are some facts about the Democrats' health care bills: They reduce benefits for seniors, according to the Congressional Budget Office; young people, and perhaps most others, pay higher premiums for health insurance, according to nonpartisan analysts; just because you like your health care insurance does not mean you can keep it, according to the Congressional Budget Office; if you don't buy the insurance policy the government requires, you pay an excise tax of almost \$2,000, according to legislative language; and the cost of health care increases—not decreases—according to the Congressional Budget Office. And none of the plans contains language, known as "tort reform," to reduce frivolous lawsuits against medical personnel.

Mr. Speaker, let's give the American people the facts about the Democrats' health care proposals. If we do, they will insist that we start over and get it right.

IT IS TIME TO REPEAL "DON'T ASK, DON'T TELL"

(Mr. SESTAK asked and was given permission to address the House for 1 minute.)

Mr. SESTAK. Mr. Speaker, the President correctly addressed the cratering of our economy at the beginning of his administration. And while it's intense, it's no longer intensifying, and we're on the road to economic recovery.

He then took on health care reform, which was correct, with 14,000 Ameri-

cans losing their health care every day, to provide them affordable, accessible health care in the future.

It's time to address an issue of our ideals, and that is the repeal of "don't ask, don't tell" in the military that discriminates against gays.

I served 31 years in the military and rose to be a three-star admiral. I went to war, and we knew by public survey that those who went with me, a certain percentage, were gay. How could I, or anyone, come home and say they don't now deserve equal rights? It's time, Mr. President and this Congress, to hold up a national mirror and say that's not who we are; we are better than that, and repeal "don't ask, don't tell" this year.

THREE DAYS

(Mrs. BACHMANN asked and was given permission to address the House for 1 minute.)

Mrs. BACHMANN. Mr. Speaker, today the majority leader just committed himself and the Speaker of the House to giving the public and Members of Congress 72 hours—or 3 days—to read the bill that will require the government takeover of health care. Three days. How magnanimous of them. A bill that will destroy America's health care system, and doctors, nurses, hospitals, clinics, insurance companies, families, and individuals will have 3 whole days to read this bill and then call their Member of Congress to weigh in. Three months to read this bill would be an abbreviated amount of time.

This bill will soon become Medicare for all. Medicare, as we know, will be bankrupt inside of 8 years, and as the ship is taking on water and sinking, this Congress wants to pour more water into the boat. And they think it's magnanimous to give us 3 days to read the bill? Please. Three months would be a minimum.

HEALTH INSURANCE REFORM WILL HELP SENIORS

(Mr. TONKO asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. TONKO. Mr. Speaker, I would like to take a moment to talk about how the health insurance reform will help our Nation's seniors.

We have all heard about the dreaded Medicare part D doughnut hole—the gap in prescription drug coverage that 7,300 seniors a year in my congressional district alone face. Seniors who fall in the doughnut hole must cover the full cost of their prescription drugs, forcing many to cut back on their prescription use.

H.R. 3200 fills in the doughnut hole, shrinking it over several years until there is no interruption in prescription drug coverage for our seniors. Until the doughnut whole is completely filled, H.R. 3200 also offers discounts on

brand-name prescription drugs to seniors who fall into that doughnut hole.

H.R. 3200 also makes great strides in improving the care Medicare patients receive. It includes provisions that encourage doctors to spend more time with their patients and to check up with them more frequently. Accountable care organizations and medical homes in the bill will promote coordination of care amongst the different health care professionals and result in better health care outcomes for Medicare patients.

I am proud to support this bill and encourage my colleagues to do the same

FLAWED HEALTH CARE REFORM

(Mr. GINGREY of Georgia asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. GINGREY of Georgia. Mr. Speaker, I appreciate Secretary Sebelius coming to the Capitol yesterday to meet with the Republican Study Committee. And I asked the Secretary if the President intended to keep the promises he made on health care, specifically if he will stick by his pledge not to sign a reform plan that would add a dime to the deficit; ease access to taxpayer funds for illegal immigrants; reduce Medicare benefits to our seniors; or cause anyone who is happy with the coverage they currently have to lose it.

Secretary Sebelius gave no response regarding the first three pledges but on the fourth, she said it is impossible to guarantee Americans can keep the health coverage they now have.

Mr. Speaker, this underscores how flawed this reform plan is. The vast majority of Americans are happy with the health care coverage they currently have. Certainly we need reform for those Americans for whom the system is not working, but we shouldn't force as many as a hundred million persons into a government-run health care plan. H.R. 3200 would do exactly that.

We can do better.

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HEALTH CARE REFORM AND BALANCING THE BUDGET

(Mr. BURTON of Indiana asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. BURTON of Indiana. Madam Speaker, I ran into one of my constituents last week, a fellow named Jim Byers, and he said, You know, if you guys could balance the budget, I'll bet you could reach an agreement on health care. And he said, Why don't you talk to your Democrat colleagues about giving a guarantee that they'll balance the budget in a reasonable length of time? And if they'll do that then you'll probably be able to work out the health care differences that you have.